

PART B - FEE(S) TRANSMITTAL

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1912 7590 12/31/2008

AMSTER, ROTHSTEIN & EBENSTEIN LLP
 90 PARK AVENUE
 NEW YORK, NY 10016

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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

EM289896768US	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/538,976	12/05/2005	Sectharama A. Acharya	01/23/2009 MBELETE2 00000032 10538976	6788

TITLE OF INVENTION: MODIFIED HEMOGLOBIN AND METHODS OF MAKING SAME

01 FC:1501
 02 FC:1504
 1510.00 OP
 300.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/31/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
LIU, SAMUEL W	1656	530-385000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Albert Einstein College of Medicine of
 Yeshiva University

Bronx, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☒ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-1785 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature _____

Date January 21, 2009

Typed or printed name Alan D. Miller

Registration No. 42,889

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/538,976	12/05/2005	Seetharama A. Acharya	96700/1023	6788

TITLE OF INVENTION: MODIFIED HEMOGLOBIN AND METHODS OF MAKING SAME

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(A) NAME OF ASSIGNEE

Albert Einstein College of Medicine of
Yeshiva University

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Bronx, New York

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

Alan D. Miller

Typed or printed name

Date January 21, 2009

Registration No. 42,889

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Intellectual Property Law

90 Park Avenue
New York NY 10016

Main 212 336 8000
Fax 212 336 8001
Web www.arelaw.com

Partners

Morton Amster
Jesse Rothstein (1934 - 2003)
Daniel Ebenstein
Philip H. Gottfried
Neil M. Zipkin
Anthony F. Lo Cicero
Kenneth P. George
Abraham Kasdan, Ph.D.
Ira E. Silfin
Chester Rothstein
Craig J. Arnold
Kenneth M. Bernstein

Joseph M. Casino

Michael V. Solomita
Charles R. Macedo

Of Counsel

Michael J. Berger

Senior Counsel

Marc J. Jason
Richard S. Mandaro
Marion P. Metelski
Alan D. Miller, Ph.D.

Associates

Patrick Boland*
Holly Pekowsky
Max Vern
Brian A. Comack
David Mitnick
David A. Boag
Matthieu Hausig
Jung S. Hahm
Reiko Kaji
Norjean McCaffrey
Benjamin M. Halpern*
Matthew A. Fox

Michael J. Kasdan
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Stuart Shapley
Brett M. Pinkus*
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Nathan Weber
Robert D. Burak

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January 21, 2009

Via Express Mail
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Alan D. Miller
Direct 212 336 8094
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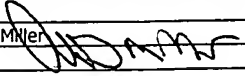
Re: U.S. Patent Application No. 10/538,976
Title: MODIFIED HEMOGLOBIN AND METHODS OF MAKING SAME
Applicants: Seetharama A. Acharya and Belur N. Manjula
Our File: 96700/1023

Dear Sir:

Enclosed please find the following documents in connection with the above-identified application:

1. a Part B Fee(s) Transmittal sheet (1 page, in duplicate);
2. a check in the amount of \$1,810.00 to cover Issue and Publication fees for a small entity; and
3. a return receipt postcard.


Please charge any outstanding amount or credit any overpayment to Deposit Account No. 01-1785. Please also acknowledge receipt of the enclosed documents by stamping the enclosed postcard and returning the same to us.

"Express Mail" mailing label no.	EM 289896768 US
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Name:	Alan D. Miller
Signature:	

Dated: January 21, 2009
New York, New York

Respectfully submitted,

AMSTER, ROTHSTEIN & EBENSTEIN LLP
Attorneys for Applicants
90 Park Avenue
New York, New York 10016
(212) 336-8000

By: 
Alan D. Miller, Reg. No 42,889